

ISSUE SLIP STAPLE AREA (for additional cross references)

P SITI N	INITIALS	ID N .	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
F RMALITY REVIEW		68045 5	10-30-40 11280

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral)... Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	1/12/44
1	✓
2	✓
3	✓
4	✓
5	✓
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Claim	Date
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Claim	Date
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EST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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